



## Utility Deposit Form

*(Please print and answer all questions)*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Phone Number (including area code) \_\_\_\_\_

Settlement / Move In Date \_\_\_\_\_ Rental House \_\_\_\_\_ Yes \_\_\_\_\_ No

New Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License / State \_\_\_\_\_

Former Address \_\_\_\_\_

Applicant's Current Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Employer's Phone Number (including area code) \_\_\_\_\_

\_\_\_\_ Full Time \_\_\_\_ Part Time How Long Employed \_\_\_\_ Years \_\_\_\_ Months

Former Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone Number (including area code) \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Spouse's Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Phone Number (including area code) \_\_\_\_\_

\_\_\_\_ Full time \_\_\_\_ Part Time How Long Employed \_\_\_\_ Years \_\_\_\_ Months

Remarks by Verifier \_\_\_\_\_

## Application for Electric Service

The Town of Clayton is hereby requested to supply electric service at the premises known as:

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The undersigned customer\* hereby agrees to take and pay for all electricity consumed on said premises in accordance with the applicable tariffs, rules, and regulations of the Town which are available for inspection at the Town Office. The customer further agrees to make a suitable advance payment to insure payment for service or otherwise satisfy requirements of the Town of Clayton. The customer acknowledges that utility bills are due on the 20<sup>th</sup> of every month. The customer acknowledges that late payments will receive a late fee of \$15 for electric service and \$15 for water/sewer service. By signing this application and making a request for electric service, the undersigned hereby acknowledges and agrees to pay any previously existing and unpaid debts owned by them to the Town of Clayton.

This is to notify you that the costs/fees associated to collect any unpaid balances will be added to the outstanding balance.

Utility Deposit Amount **\$125.00 (Owner)**  
**\$200.00 (Rentor)**

*Payable to: Town of Clayton*

Signed: \_\_\_\_\_ (SEAL)

Refundable deposit of \$100 or \$175 upon  
departure from the Town of Clayton

Signed: \_\_\_\_\_ (SEAL)

Non-Refundable deposit of \$25  
for utility connection fee

\_\_\_\_\_  
Mailing Address if different from above

\_\_\_\_\_  
Phone Number

Approved:

Town of Clayton

By: \_\_\_\_\_

Account Number \_\_\_\_\_

\*Must be signed by husband and wife

### **\*\*PLEASE NOTE\*\***

The new developments in the Town of Clayton have mail delivery. The old sections of Town do not have mail delivery. If you live within the older sections of Town, you will need to obtain a post office box and inform the Billing Department at the Town of Clayton of your new post office box number to receive your monthly utility billing.